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Feb 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N51104 (0)
 1. Corporation Name
ENDEAVOR GROUP HOMES, INC.



Principal Place of Business ENDEAVOR GROUP HOMES, INC 8535 NW 29TH DRIVE CORAL SPRINGS FL 33065	Mailing Address Homes ENDEAVOR GROUP HOMES, INC 8535 N.W. 29TH DRIVE CORAL SPRINGS FL 33065 US
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3. Date Incorporated or Qualified 10/02/1992	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 65-0367966	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 Zip Country	29 Zip Country

9. Name and Address of Current Registered Agent
ROSENBLUM, MARTIN S P.A.
8220 STATE ROAD 84
SUITE 302
FORT LAUDERDALE FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City **FL** **85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

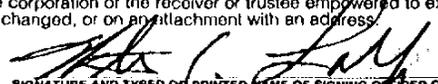
12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	POSEY, LINDA
STREET ADDRESS	8511 N.E. 21ST WAY
CITY-ST-ZIP	FT LAUDERDALE FL 33308
TITLE	D <input type="checkbox"/> DELETE
NAME	FLADER, JANET
STREET ADDRESS	6562 BOCA DEL MAR DR
CITY-ST-ZIP	BOCA RATON FL 33443
TITLE	D <input type="checkbox"/> DELETE
NAME	JONES, ANNE L
STREET ADDRESS	6510 SW 49TH STREET
CITY-ST-ZIP	DAVIE FL 33314
TITLE	D <input type="checkbox"/> DELETE
NAME	LANK, EILEEN M
STREET ADDRESS	2733 N.E. 37TH DR
CITY-ST-ZIP	FT LAUDERDALE FL 33308
TITLE	D <input type="checkbox"/> DELETE
NAME	ONORATI, GARY
STREET ADDRESS	767 SO STATE ROAD 7 (SUITE 13)
CITY-ST-ZIP	MARGATE FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **William C. Lank Jr.** 2/4/98 954-978-6600

CR2E037 (10/97)